



Inspection Report on

Cartref Mynydd

Pontarddulais

Date Inspection Completed

13/06/2023

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About Cartref Mynydd

| | |
|--|---|
| Type of care provided | Care Home Service Adults Without Nursing |
| Registered Provider | Orbis Education and Care Limited |
| Registered places | 5 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | 19/10/22 |
| Does this service provide the Welsh Language active offer? | This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture. |

Summary

There was a priority action notice issued at the last inspection regarding the service not having sufficient staff to meet people's needs to keep them safe and an area for improvement regarding agency staff profiles not having the necessary recruitment information contained within them. This inspection identified, both areas have been achieved.

People are cared for by care staff who know them well and overall they are supported to achieve their well-being outcomes. People have opportunities to share their views in a format suited to their needs and their rights are respected. Most people are engaging in various activities they enjoy regularly. People's health needs are supported, they are encouraged to take part in regular exercise, and they eat nutritious meals.

Care staff are well supported and there is sufficient staff to meet the needs of the people living at the home, albeit quite a large number of consistent agency staff. However, the service provider has taken steps to improve their recruitment of permanent care staff. Care staff receive regular supervision and told us they enjoyed their work.

The home is clean and tidy and people's bedrooms reflect their individual preferences. Health and safety checks are carried out regularly.

There are good quality assurance systems in place at the service.

Well-being

People have a voice regarding their day-to-day lives. They are supported to contribute to their personal plans, are supported to work towards their goals and have a say in regular house meetings. Care staff recognise and value people's individual identities and routines. Choices are available to people regarding how they wish to be supported and how they want to spend their time. Written information is available regarding the service people can expect to receive and they know how to raise a complaint if they need to. People have access to an advocacy service and see their families regularly which, where required, is supported by care staff.

People are supported to be healthy and lead active lives. Care staff help people to access health and social care advice when needed, which ensures they stay as well as they can. The home liaises with specialist professionals regarding people's health and well-being. Care staff arrange and attend various health appointments with people. Medication is stored and appropriately administered with clear systems in place. Care staff promote a healthy diet and people are encouraged to participate in a variety of physical and recreational activities.

The service has relevant policies and procedures in place to ensure people are safeguarded from harm. They follow safe staff recruitment processes, complete appropriate checks before care staff begin work, and the manager monitors care staff practice. Risk assessments ensure any care provided or activities undertaken are as safe as they can be. People are regularly consulted about 'feeling safe' at individual house meetings which are suited to the needs of those living at the service and includes who they can talk to if they have any worries.

People live in an environment which supports their well-being. Care and support is provided within a suitable and homely environment which promotes people's sense of belonging. The home is kept clean and tidy. The home offers people privacy or the opportunity to engage with others in communal areas.

Care and Support

People can be confident the service has systems in place to determine they can meet their needs. The service provider's pre-admission process assesses whether, and how the home can meet people's needs and support them to achieve personal outcomes in partnership with a range of professionals. Provider assessments are completed to determine people's overall needs and risks to identify whether the service is suitable to meet people's needs.

People have up to date, detailed personal plans in place. People contribute to their plans, which provide information about their care and support needs and routines. We saw plans were reviewed and amended regularly following regular multi-disciplinary meetings. Care staff are familiar with people's care and support needs and how they should be met. People tell us they are happy with the care and support they receive, and they feel staff treat them with respect.

Good systems are in place to protect people from harm and abuse. Safeguarding training is completed by all care staff. Care staff are aware of their responsibilities in relation to reporting any concerns they may have regarding the safety of the people they support. Risk assessments are in place for known risks to people's health and safety, and record how the risks will be managed. Detailed recordings are made, and documentation is updated should risks change.

People's well-being is central to the care and support strategies used. The service has input from a multi-disciplinary team to offer advice and guidance on the best approaches to support people and care staff. The service provider ensures care staff understand people's physical and emotional health needs, and how these affect their behaviour, so care staff can respond appropriately. There are systems for recording incidents, including physical intervention records. There is an effective system of management oversight of records and evidence that documentation is reviewed and updated as and when changes occur.

The service is not currently working towards the active offer.

Environment

The building and facilities are as described within the statement of purpose. Overall, people are happy with their own rooms, and they are personalised with their belongings and photographs. People are able to choose the décor and furnishings for their rooms. This creates a homely feel and we observed people feeling settled in their environment.

The outdoor area surrounding the property has well-maintained areas, and an area which will be used to grow vegetables. The garden is a pleasant area to sit and contains suitable garden furniture and other equipment such as a swimming pool for the warmer weather. The environment is kept clean and tidy.

There are plans to create a space for care staff to have somewhere to sit and take their breaks away from the main home. This was included in much of the staff feedback received during our inspection that it was very much needed due to the rural location of the home. The manager and RI agreed this was required and had plans to implement somewhere suitable for care staff.

Health and safety checks of the premises are regularly completed. Fire safety arrangements are in place with regular servicing and checks being undertaken. Measures are in place to prevent unauthorised access into the building and our identity was verified before we could enter the premises. Confidential information is stored securely.

Leadership and Management

People can access written information about the service. There is a statement of purpose in place, which clearly describes the service provided and how the service is delivered. There are suitable arrangements in place to oversee the smooth day-to-day running of the service. There are clear lines of communication between the responsible individual (RI) and the manager. There is an open and transparent culture at management level of wanting to work together to provide a good quality service, which improves the lives of the people supported. People have visually formatted information about the home, which includes how to access an advocate and how to make a complaint.

People are cared for by suitable and a safe number of care staff who are supported in their roles. The home currently employs a high number of agency care staff to meet the daily staffing ratios required to deliver safe care; however, the same agency staff are used for consistency. The service provider has an on-going recruitment process to recruit further permanent and qualified staff. Agency staff profiles contained sufficient information to ensure they were suitable to work at the service with the necessary training and recruitment checks. All care staff are supported in their role through regular supervision. The manager holds regular team meetings for the whole staff team and records evidence discussions on people's progress or any issues that may have arisen. Training records confirm the manager, and most care staff access suitable training to equip them to provide the right care. Care staff told us they enjoy working at the home, feel valued by the organisation and the standard of support from the leadership and management team is good.

The service provider has good quality assurance systems in place to monitor the operation of the home, and ensure they deliver good quality care and support to people. The RI visits the home at least every three months and speaks with the people, care staff and the manager. They also check records and write a report on their findings, which identifies any areas for the manager to address. Every six months, the RI completes a review of the quality of care provided at the home based on feedback from key people, examination of records and care staff practice. The review focuses on the experience of people and identifies areas for the development of the service.

Summary of Non-Compliance

| Status | What each means |
|---------------------|---|
| New | This non-compliance was identified at this inspection. |
| Reviewed | Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection. |
| Not Achieved | Compliance was tested at this inspection and was not achieved. |
| Achieved | Compliance was tested at this inspection and was achieved. |

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

| Regulation | Summary | Status |
|------------|---|----------|
| N/A | No non-compliance of this type was identified at this inspection | N/A |
| 34 | The service provider has not ensured that , at all times a sufficient number of suitably qualified , trained, skilled, competent and experienced staff are deployed to work at the service having regard to the statement of purpose and individual's care and support needs. | Achieved |

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

| Area(s) for Improvement | | |
|-------------------------|--|----------|
| Regulation | Summary | Status |
| N/A | No non-compliance of this type was identified at this inspection | N/A |
| 35 | The service provider is not ensuring agency profiles and induction processes are sufficiently robust | Achieved |

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Date Published 01/08/2023